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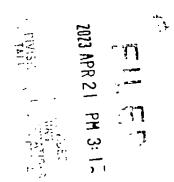
(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nan	ne)
(Uc	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

T. SCOTT APR 2 4 2023



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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: BMS8 PROPERTIES CORF	·
, (Name o	f Resulting Florida Limited Company)
The enclosed Articles of Conversion, A Business Entity" into a "Florida Limito"	Articles of Organization, and fees are submitted to convert an "Other ed Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence conce	rning this matter to:
(Contact Person)	
RS ACCOUNTING AND TAX SERVICES	INC
(Firm/Company)	
10 FAIRLUM DRIVE ST	E 201A
(Address)	
DETRGEO Beach & City, State and Zip Co	33442 nde)
info@rsaccountingtax.com	
E-mail Address: (to be used for future annu	nal report notifications)
For further information concerning this	s matter, please call:
RODRIGO P SILVA	at (<u>954</u>) 623-7615
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following a dollars and drawn on a bank located in	imount: (All checks processed by this office must be payable in US the United States)
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ■ \$155.00 Filing F and Certificate of Status	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes

(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a CORPORATION	_
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorporated under the laws of FLORIDA	
(Enter state, or if a non-U.S, entity, the name of the country)	
on 09/26/2019	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
BMS8 PROPERTIES LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: 05/02/2022	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after	
the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.	
5. The plan of conversion has been approved in accordance with all applicable statutes.	
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLES OF ORGANIZATION FURTE	ORIDA DIMITED DADIMIT I COM ACC
ARTICLE 1 - Name: The name of the Limited Liability Company is:	
BMS8 PROPERTIES LLC	
(Must contain the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5406 NW 50TH CT	5406 NW 50TH CT
COCONUT CREEK, FL 33073-3310	COCONUT CREEK, FL 33073-3310
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	registered agent are:
RS ACCOUNTING AND TAX	
10 FAIRWAY DRIVE SUITE 2	
Florida street address (P.O). Box NO1 acceptable)
DEERFIELD BEACH	FL 33441
City	Zip
liability company at the place designated in registered agent and agree to act in this capac grantes relating to the proper and complete	to accept service of process for the above stated limited in this certificate. I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 605, F.S
(CONTIN	NUED) APR 21 PR

Signed this 2 day of MAY	_ 2(1 <i>Z3</i>
Signature of Authorized Representative of Linu	ted Liability Company:
Signature of Authorized Representative: 14 Printed Name: MARCO AURELIO MOURA SOTTOVIA	Title: PRESIDENT
Signature(s) on behalf of Other Business Entity:	
Signature: No Signature: Name:	
Signature: Silvania C cle Mello Printed Name: Silvania C DE Mello	Title: AM BA
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or a lift Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	tv Partnership:
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

• • • .

and the second s	Name and Address:
"AMBR" = Authorized N	Member
"MGR" = Manager	MADOO AUDILIO MOUDA COTTOVIA
AMBR	MARCO AURELIO MOURA SOTTOVIA
	5406 NW 50TH CT
	COCONUT CREEK, FL 33073-3310
AMBR	SILMARA C DE MELLO
	5406 NW 50TH CT
	COCONUT CREEK, FL 33073-3310
71: 1	•
(Use attachment if necess	sary)
ICI E W. Other manufacture :	if any
TELLE SELUTAET DEOVISIONS A	• ••••
ICLE V: Other provisions, i	
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E	JRE:
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REQUIRED SIGNATU	
REQUIRED SIGNATU	member or an authorized representative of a member
Signature of a in This document is executed any talse information submit	member or an authorized representative of a member in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that itted in a document to the Department of State constitutes a third degree felon
Signature of a in This document is executed any talse information submit as provided for in \$ \$17.155	member or an authorized representative of a member in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that itted in a document to the Department of State constitutes a third degree felon

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)